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From:	Anaria H. Maori for Jennifer L. Bales
Phone number:	303-664-4734
Fax number:	303-664-4735
Total pages, including cover:	15
RE:	Reply by Patent Owner to a non-Final Office Action under 37 CFR 1.111
Our Ref. No.	W02.101
Your Ref. No.	Application No. 09/804,522 Filing Date March 12, 2001
<p>Please see the attached Amendment in response to the Office Action mailed April 27, 2005.</p> <p>Thank you,</p> <p><i>Anaria Maori</i></p> <p style="text-align: right;">RECEIVED OIPE/IAP SEP 27 2005</p>	

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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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Fax TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/804,522	
	Filing Date	March 12, 2001	
	First Named Inventor	JOHNSON, Paul E.	
	Art Unit	2872	
	Examiner Name	A. Lavaras	
Total Number of Pages in This Submission	14	Attorney Docket Number	W02.101

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Postcard
Remarks Amendment faxed to A. Lavaras, D. Dunn, and general fax number. Fee transmittal form & fee mailed in with copy of Amendment. <i>Fax transmittal</i>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Macheledt, Bales and Heidmiller, LLP		
Signature	<i>Jennifer L. Bales</i>		
Printed name	Jennifer L. Bales		
Date	September 26, 2005	Reg. No.	38,070

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature	<i>Anaria H. Maori</i>		
Typed or printed name	Anaria H. Maori	Date	September 26, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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